



HEALTH AND WELLBEING BOARD: 7 JULY 2016

REPORT OF HEALTHWATCH LEICESTERSHIRE

LISTEN TO ME #YOUNGVOICESMATTER REPORT

Purpose of report

1. The purpose of this report is to present the findings of Healthwatch Leicestershire's (HWL) 'The Listen to me: #YoungVoicesMatter report' (Appendix 1), that saw HWL listen to the views, opinions and experiences of young people.
2. As part of the HWL work programme, it was decided that there needed to be a dedicated focus on Children, Young People and Families (CYPF). Therefore the project consists of three strands of work which form part of the CYPF Series:
 - Enter & View CAMHS Unit visit
 - Listen to Me #YoungVoicesMatter Report
 - Parents Quick Poll
3. The 'Listen to me: #YoungVoicesMatter report' highlights a number of experiences and insights into how young people feel about services.
4. In total 429 young people were spoken to: 346 were via hard copy and online surveys; and 83 were in groups via youth engagement, which included Loughborough University, South Leicestershire College, Children in Care Council, County Youth Council for Leicestershire and TwentyTwenty.

Policy Framework and Previous Decisions

5. The County Council, following the Health and Social Care Act 2012, is required to directly commission a local Healthwatch. The local Healthwatch in turn has a set of statutory activities to undertake, such as gathering local views and making these known to providers and commissioners, monitoring and scrutinising the quality of provision of local services and a seat on the Health and Wellbeing Board.

Context and Background to the project

6. Involving young people in the process to improve services is an important element in building confidence that their opinions will be listened to and acted upon.
7. In mid December 2015 HWL met with members of the Student Council at South Leicestershire College to gather insights to help shape and inform the work. An interactive session was held to capture themes and issues that attracted 40

students aged 16 to 19, which asked them what mattered most to them concerning their health and social care. From the feedback gathered, mental health and sexual health were the key topics that emerged.

8. Between 3 February 2016 and 13 May 2016, HWL listened and talked to young people about their experiences and suggested improvements of services, in order to highlight emerging issues to commissioners and service providers locally.

Key Findings

9. These key findings can be found in the main report and alongside this, HWL want to highlight observations and reflections on a number of experiences and insights into how young people feel about services.

Joint approach to raising awareness

10. The Children and Young People element of the Better Care Together (BCT) programme has committed to 'Improving emotional health and wellbeing for children into adulthood' and to 'making services easier for patients and parents to understand and find their way around'. Many of the conversations with young people were based around knowing where to find and access services. Over 50% of young people thought that their school, college or university did not provide enough information about mental health. They felt that key messages and signposting to appropriate services could be delivered better. HWL's recommendations are as follows:-

- a) *Stakeholders and service providers work together with educational establishments to improve the visibility and information about mental health support services available to young people.*
- b) *More awareness through public health about the signs of mental health including anxiety and depression.*

Developing early emotional resilience

11. The BCT Transformational plan for mental health and wellbeing services for children and young people has a vision to provide high quality support to help young people overcome emotional and mental health challenges quickly and locally.
12. During conversations with young people, they spoke about the aspiration of greater emotional support whilst waiting for services that support people with mental health issues. Young people said that whilst waiting to see a health professional, they are left to deal with their situation alone. They spoke about some initial organised peer support and some guidance on how to deal with their emotions.
13. The survey findings showed that 1 in 3 (102) young people had self-harmed, which is a significant number from the overall respondents. Again, young people recognised that they needed more emotional support to deal with their self-harming. HWL's recommendations are as follows:-

- c) *An information pack given to young people who are waiting to access mental health services about relevant support services and websites available.*
- d) *More support groups to provide emotional support to young people is investigated, to support people with early signs of mental health problems and those that are waiting to access services.*
- e) *An accessible and approachable specialised service for young people that self-harm.*

Culture and Stigma

- 14. 44% of young people told HWL that professionals respected their opinions 'sometimes'. Young people said that professionals do not take their opinions and knowledge of their own symptoms seriously. Young people felt that they would be judged when accessing specific health services, not only by staff but also by their peers.
- 15. 73% of young people told HWL that they had not used a sexual health service. The findings also showed that the percentage of young women that accessed a sexual health service far outweighs that of young men. HWL's recommendations are as follows:-
 - f) *Health stakeholders jointly produce/ endorse campaigns addressing the stigma of mental health.*
 - g) *Continue to promote the accessing of sexual health services to young people including encouraging young men to better use these services.*

Recommendations to the Health and Wellbeing Board

- 1. The Health and Wellbeing Board is asked to note report, key findings and themes.
- 2. The Health and Wellbeing Board is also invited to comment on the recommendations (a) - (g) outlined above.
- 3. Members of the Board are asked to suggest where else this report can be presented to share the findings to inform commissioning and providers for service improvements and performance monitoring.

Officer to Contact

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List of Appendices

- 16. Appendix 1 - Listen to Me #YoungVoicesMatter Report

Relevant Impact Assessments

Equality and Human Rights Implications

17. Healthwatch Leicestershire is aware that the Public Sector Equality Duty (PSED) applies to all functions of public authorities that are listed in Schedule 19 Equality Act 2010. Schedule 19 list does not include Healthwatch England or Local Healthwatch organisations, however as bodies carrying out a public function using public funding we are subject to the PSED general duty.
18. Healthwatch Leicestershire is committed to reducing the inequalities of health and social care outcomes experienced in some communities. We believe also that health and social care should be based on a human rights platform. We will utilise the Equality Act 2010 when carrying out our work and in influencing change in service commissioning and delivery.